

101

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	NK	12/989	2/2/01
RESPONSE FORMALITY REVIEW			3/8/01

09/774/607

INDEX OF CLAIMS

- ✓ ..... Rejected

= ..... Allowed

- (Through numeral)... Canceled

÷ ..... Restricted
- N ..... Non-elected

I ..... Interference

A ..... Appeal

O ..... Objected

Claim		Date	
Final	Original		
1	✓	5/2/01	
2	✓	5/2/01	
3	✓	5/2/01	
4	✓	5/2/01	
5	✓	5/2/01	
6	✓	5/2/01	
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Claim		Date	
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H.S.  
3-12-01

If more than 150 claims or 10 actions  
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